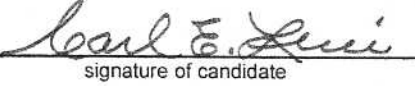

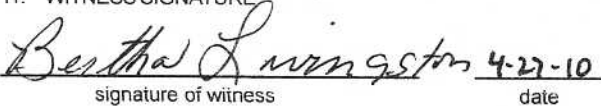
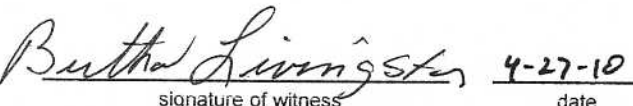


CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT APRIL 24, 2010		2.a. NAME OF CANDIDATE OR COMMITTEE CARL E LEVI	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE MAY 4, 2010	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone 3628 GLENDON DR CHATTANOOGA TN 37403 (423) 698-3997			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone			
5. OFFICE SOUGHT (include district number, if applicable) HAMILTON COUNTY TRUSTEE		6. NAME OF POLITICAL TREASURER (may be candidate) JOSEPH C. LIVINGSTON, JR EA	
7. CATEGORY OR REPORT (Check one) <input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input checked="" type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD JAN. 16, 2010		8.b. ENDING DATE OF REPORTING PERIOD APRIL 24, 2010	
9. (Check one) a. <input type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.) b. <input type="checkbox"/> This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.			
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.			
 signature of candidate		 signature of political treasurer	
 signature of witness 4-27-10 date		 signature of witness 4-27-10 date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ 37,032.00	
b. TOTAL RECEIPTS THIS PERIOD		\$ 3,170.88	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ 24,808.93	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ 15,393.95	
e. TOTAL LOANS OUTSTANDING		\$ 26,859.16	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ -0-	



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD	
	FROM:	TO:

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 100⁰⁰

b. Itemized Contributions (over \$100 from each source this period) \$ 960⁰⁰

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 1060⁰⁰

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 1859¹²

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ 261⁷²

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 3,170⁸⁸

DISBURSEMENTS

19. EXPENDITURES (other than loan payments)

a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total of Expenditures (\$100 or less each payee) \$ _____

b. Itemized Expenditures (Over \$100 each payee this period) \$ 24,808⁹²

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 24,808⁹²

20. LOAN REPAYMENTS MADE THIS PERIOD \$ -0-

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 24,808⁹²

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ _____

b. Itemized in-kind contributions (over \$100 from each source this period) \$ _____

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ -0-

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ 0

b. Itemized Obligations Outstanding (Over \$100 each) \$ 0

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) \$ 0



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE CARL E LEVE				2. REPORT COVERING THE PERIOD FROM: 1-16-10 TO: 4-24-10	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name RUSSELL		Middle Name		Contribution Received For:	
Last Name/Organization Name BEAN				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 615 WALNUT ST. STE 200				<input type="checkbox"/> Runoff (Local Elections Only)	
City CHATTANOOGA	State TN	Zip Code 37402		Date of Contribution 2-1-2010	Amount of Contribution 100 -
Occupation CITY JUDGE					Aggregate This Election 100 -
Employer CITY OF CHATTANOOGA					
First Name OSCAR		Middle Name		Contribution Received For:	
Last Name/Organization Name BROCK				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 231 W BROW OVAL				<input type="checkbox"/> Runoff (Local Elections Only)	
City LOOKOUT MOUNTAIN	State TN	Zip Code 37350		Date of Contribution 2-9-2010	Amount of Contribution 250 -
Occupation					Aggregate This Election 250 -
Employer					
First Name BEN		Middle Name S		Contribution Received For:	
Last Name/Organization Name LANDRESS				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 99 SOUTH CREST RD				<input type="checkbox"/> Runoff (Local Elections Only)	
City CHATTANOOGA	State TN	Zip Code 37404		Date of Contribution 2-9-2010	Amount of Contribution 200 -
Occupation DEVELOPER					Aggregate This Election 200 -
Employer CBL					
First Name ROY		Middle Name		Contribution Received For:	
Last Name/Organization Name RUMFELT, JR				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 1490 COUNTLAND DR.				<input type="checkbox"/> Runoff (Local Elections Only)	
City HIXSON	State TN	Zip Code 37343		Date of Contribution 4-7-2010	Amount of Contribution 100 -
Occupation					Aggregate This Election 100 -
Employer					
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)					650 -



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE CARL E LEVI				2. REPORT COVERING THE PERIOD FROM: 1-16-10 TO: 4-24-10	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 650
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name CLAUDE		Middle Name W		Contribution Received For:	
Last Name/Organization Name SHEAREN				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 122 VALLEYBROOK RD.				<input type="checkbox"/> Runoff (Local Elections Only)	
City HEXSON	State TN	Zip Code 37443-3060	Date of Contribution 1-25-2010		Amount of Contribution 100-
Occupation USAF COL					Aggregate This Election 100-
Employer RETIRED					
First Name TERRE		Middle Name		Contribution Received For:	
Last Name/Organization Name THOMPSON - HALL				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 8904 NELSON RD				<input type="checkbox"/> Runoff (Local Elections Only)	
City SODDY DASSY	State TN	Zip Code 37379	Date of Contribution 3-5-2010		Amount of Contribution 100-
Occupation					Aggregate This Election 100-
Employer					
First Name FREDRICK		Middle Name J		Contribution Received For:	
Last Name/Organization Name HEADRICK, JR				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 934 DUNKINANE RD.				<input type="checkbox"/> Runoff (Local Elections Only)	
City SIGNAL MOUNTAIN	State TN	Zip Code 37377	Date of Contribution 3-8-2010		Amount of Contribution 100-
Occupation					Aggregate This Election 100-
Employer					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution		Amount of Contribution
Occupation					Aggregate This Election
Employer					
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)					.950-



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE CARL E LEVI				2. REPORT COVERING THE PERIOD FROM: 1-16-10 TO: 4-24-10	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount - 0 -
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)					
First Name JACQUELYN D		Middle Name KOBET		Purpose of Expenditure	
Last Name/Business Name KOBET GRAPHIC DESIGN				Amount of Expenditure	
Address 627 REVERLANDING DR				Bulk mailing 54 ⁶³	
City SODDY DAISSY		State TN		Printing 437 ⁰⁰	
		Zip Code 37379		491⁶³	
First Name		Middle Name		Purpose of Expenditure	
Last Name/Business Name US POSTMASTER				Amount of Expenditure	
Address 6050 SHALLOWFORD RD				Bulk mailing	
City CHATTANOOGA		State TN		Zip Code 37421	
				476⁶⁰	
First Name		Middle Name		Purpose of Expenditure	
Last Name/Business Name ADVANTAGE PRINTING & MAILING				Amount of Expenditure	
Address				Bulk mailing	
City		State		Zip Code	
				1,246⁵³	
First Name ALLEN		Middle Name JONES		Purpose of Expenditure	
Last Name/Business Name FAIRWAY OUTDOOR ADVERTISING				Amount of Expenditure	
Address 4031 BRAINERD RD.				Billboards	
City CHATTANOOGA		State TN		Zip Code 37411	
				17,550⁰⁰	
First Name		Middle Name		Purpose of Expenditure	
Last Name/Business Name A WED 44				Amount of Expenditure	
Address PO BOX 1601				Website Expense	
City SODDY DAISSY		State TN		Zip Code 37384	
				500⁰⁰	
First Name		Middle Name		Purpose of Expenditure	
Last Name/Business Name VENCENT PRINTING CO. INC				Amount of Expenditure	
Address PO BOX 1000, DEPT 173				Signs	
City MEMPHIS		State TN		Zip Code 38184	
				1,859¹⁶	
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)					22,123⁹²



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE CARL E LEVI				2. REPORT COVERING THE PERIOD FROM: 1-16-10 TO: 4-24-10		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 22,123⁹²	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)						
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name PR PROMOTIONS				PRINTING		2,685⁰⁰
Address 1708 SUNRISE DR						
City POTOMAC		State MD Zip Code 20854				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name						
Address						
City		State Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name						
Address						
City		State Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name						
Address						
City		State Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name						
Address						
City		State Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name						
Address						
City		State Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name						
Address						
City		State Zip Code				
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)					24,808⁹²	

